MENTEE APPLICATION

NOTE: INFORMATION IS VOLUNTARY. HOWEVER THE INFORMATION THAT IS PROVIDED WILL ASSIST IN MATCHING SOMEONE OF SIMILAR INTERESTS AND CAREER PATHS. THE MORE RELIABLE THE INFORMATION IS, THE BETTER THE MATCH OF MENTOR WITH MENTEE. ALL INFORMATION COLLECTED WILL BE USED FOR THE "MENTORING PROGRAM" AND FOR NO OTHER PURPOSE.

NAME:	PARK:	
ADDRESS:		
CITY:	STATE:	ZIP:
WORK PHONE #:	HOME P	PHONE #:
E-MAIL ADDRESS:	OK TO CONTAC	PHONE #: CT AT HOME:
JOB TITLE:	SERIES	:GRADE:
WHY DO YOU WANT TO BE	A PARTICIPANT IN THIS P	ROGRAM?
HAVE YOU EVER BEEN PAR	RT OF A MENTORING RELA	TIONSHIP? IF YES, PLEASE EXPLAIN:
WHAT SKILL AREA(S) DO Y	OU WISH TO BE MENTORE	ED IN?
WHAT TYPE OF MENTOR CO	OULD BENEFIT YOU THE M	10ST?
WHAT ARE YOUR SHORT-T	ERM CAREER GOALS (6 TC) 12 MONTHS)?
WHAT ARE YOUR LONG-TE	RM GOALS? (WITHIN THE	NEXT 3 YEARS)?
WHAT PROFESSIONAL ORG	ANIZATIONS DO VOU REI	ONG TO?

LIST WORK EXPERIENCE DISCIPLINES (NOTE . WERE/HAVE BEEN IN EACH FIELD:	
LIST PARKS OR AREAS IN WHICH YOU WOULI	D LIKE TO WORK:
SUPERVISOR'S CONCURRENCE I have my supervisor's concurrence to participate in selected to participate I agree to serve as a Mentee for the Memorandum of Agreement between myself and the Memorandum of Agreement be	r a two-year period beginning upon the finalization
Applicant's Signature	Date
Supervisor's Approval	
Tr	Date
	Date
Next Level Concurrence PLEASE SEND COMPLETED APPLICATION TO:	

MENTORING PROGRAM COORDINATOR FIRE MANAGEMENT PROGRAM CENTER NATIONAL PARK SERIVCE NATIONAL INTERAGENCY FIRE CENTER 3833 S. DEVELOPMENT AVENUE BOISE, IDAHO 83705-5354 PH. (208) 387-5090